## NOTES FROM FORT BAYARD, NEW MEXICO

BY AGNES G. YOUNG Army Nurse Corps

FORT BAYARD has ever been a stoic, a witness of tragic scenes and strife. In the old days she opened her welcoming, protecting arms to our soldiers returning from bloody combat with the warriors of Geronimc. Now, with quiet matter-of-factness, that does not mean indifference, she shelters those who fight a fiercer, more unrelenting and insidious foe than ever before stalked these wild plains, thirsting for victims.

While the generals of science marshal their forces, planning with an interest most minute and tense a campaign that shall forever rout this foe, the present victims breathe in hope the healing air of the New Mexican hills, endeavoring by rest and relaxation to rebuild a vitality that shall be strong enough to cause the enemy to retire.

No mother could be kinder to her boys than Uncle Sam is to his sick soldiers and sailors. The two hundred and sixty-eight ambulant patients are subjected to few restrictions other than those to which their life in the service has accustomed them. The only requirement absolutely insisted upon is that they should rest for certain periods daily. They roam at will through the wild country surrounding the Fort. Fine recreation and reading-rooms and a well-stocked library are at their disposal. There is no lack of lectures, local theatricals and other entertainments. All this is appreciated and enjoyed with a chronic cheerfulness that in itself does much to put the "bug" to rout. With splendid indifference or with laugh or gibe or curse they face the foe; a whine is rarely heard. Nor do they hide their heads self-deceived. They know; but never yet has knowledge bred fear.

Then there is our hospital proper—two buildings, each able to accommodate forty or more patients. One receives the patients newly arrived at the Fort, the other those of the ambulants who require medical treatment and nurses care. Here as elsewhere reliance rests upon the old tripod, good food, rest and fresh air. The work in the infirmary cannot fail to be sad, for in spite of all that can be done one occasionally overhears the standard good-bye: "Well, boys, I'll pass in my checks to-night." They rarely calculate wrong. One of such cases was a sergeant, twice honorably mentioned for gallantry in action, and the indifferent possessor of a medal of honor. The deeds he had done were so natural to a man of his calibre that he did not see why they should call for even a remark. They were nothing. Many a time he had rushed

through the old sallyport to escape the foe, but this time he had brought his enemy inside. Pain was his mortal fear, not for itself, only lest it should weaken and make a child of him. Only once did he ever give sign that he knew the worth of his own mental steel. It was a few days before his death, and he was suffering intensely from an acute neuritis. Two patients in the ward had been telling the surgeon at some length of their rheumatic pains. He said in a low tone to me as I gave him his medicine later, his lip unconsciously curling in scorn, "If they suffered like this for one instant they would howl like dogs or cry like babies." He has been at rest from pain for months, but we shall never forget his courage nor cease to miss him.

But, thank God, there is another side to the picture,—for even the very ill ones do not all die. I have in mind one patient who had hemorrhages galore and none of them small. More than once 1000 c.c. He is at home now in New York, apparently well. A man of iron nerves, a cynic who was, however contradictory it may appear, hyper-sensitive in his consideration for others. He even tried to suppress a hemorrhage one morning while breakfast was being served lest the appetites of his comrades be spoiled. The tell-tale little cough of course made this impossible. His first remark after it was all over was an apology for the discomfort he had caused the others.

The following record of a remarkable case is interesting and encouraging. The patient was an extremely nervous, almost hysterical man:

"Transfer card from Hospital, Fort ——, New York. Diagnosis Chronic Pulmonary Tuberculosis, involving both upper lobes. History previous to admission: Has had several hemorrhages at one time for three nights in succession.

August 3, 1905.—Admitted to Infirmary June 17, 1905, on account of hemorrhage, 200 c.c. Bloody sputum continued for some days. patient had nineteen hemorrhages from July 6 to present date (August 3). The respective dates and quantities of each one as follows:

1905		C.C.	1905		C.C.
July	6	300	July 28		500
2	6	125	28		350
2	6,,,,	100	29		15
2	<b>7</b>	45	29		1200
2	7	75	31		150
2	<b>7</b>	60	31		45
2	7	250	Aug. 1		350
2	8	60	1		45
2	<b>8</b>	1000	1		55
			2		150
				days total	

Average temperature, pulse and respiration during these days was:

T. P. R. T. P. R.

A.M. 97.2 60 20 P.M. 101.4 114 28

Patient fairly well nourished, but rapidly losing weight.

Appetite poor; digestion poor; sleeps poorly; extremely nervous.

October 29.—Transferred to ambulant tents. The patient is now (not quite five months later) able to hunt arrowheads on the old battle-fields among the hills surrounding our post.

The main points in the treatment of this case, as in all similar cases here, seems to be to keep the patient's nervous system in a quiescent state, and lessen or reduce the blood pressure. This is accomplished by liquid diet or no diet for a short time and the interdiction of all stimulant. The treatment by adrenalin, so frequently referred to, appears not to have found favor in this institution. An ice-bag is placed over apparent seat of hemorrhage, and is continued for twenty-four hours after all indications of hemorrhage cease. Hot water bags are applied to lower limbs, and if there are any signs of nervousness morphine .016 hypodermically is given. Absolute quiet is enjoined, the patient lying on back with head low. In any case, however slight the hemorrhage, the patient is kept quietly in bed for two weeks. The third week he may sit in chair or be wheeled to porches. The fourth week he is allowed to go to table At the end of the fourth week he is, if all is well, usually transferred to ambulant tents. While this is a fair sample of treatment, it is modified of course to fit the needs of the variety of temperaments met with.

The officers' hospital consists of the dormitory, styled "Hotel de Bug," for convalescents and the hospital proper.

The nurses find their work most interesting. They have an eight-hour duty, and conscientiously spend a part of each day breathing ozone on the hills, as a preventive of any possible inroad of the dread disease among themselves. The home life is a very happy one, and all are glad to live the duty hours with the brave fellows who so insistently claim their right to life and happiness.

CHICAGO'S DEATH RATE 13.69 PER ONE THOUSAND.—According to the report of the Commissioner of Health of Chicago, that city is the healthiest in the world with one exception, namely, Berlin. The Commissioner shows a death rate of 13.69 per one thousand population for the year 1905. He attributes this low death rate to the rigid inspection of the stock yards, the restaurant kitchens and cold storage plants.—Pacific Medical Journal.